PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09827093

CLAIMS AS FILED - PART I									SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)			TYPE		OR	SMALL		
TOTAL CLAIMS			4D					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		. 59-			X\$ 9=		OR	X\$18=	39L	
INDEPENDENT CLAIMS			minus 3 =					X40≈		OR	X80=		
ML	ILTIPLE DEPEN	DENT CLAIM PI	RESEÑT			<u> []</u> /		+135=		ОЯ	+270=	050	
* 15	the difference	in column 1 is	less than zero, enter		"0" in column 2		ŧ	TOTAL		OR	TOTAL	376	
CLAIMS AS AMENDED - PART II								,		y.	OTHER	THAM	
<i>₩</i>		(Column 1)		(Colui	nn 2) (Column 3)		3 -	SMALL ENTITY		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 26	Minus	٠. ٤	16	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	3	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
							E	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	1011	=		X\$ 9=	rec	OR	X\$18=	FEE	
SER	Independent	•	Minus	***		=		X40=			X80=		
•	FIRST PRESENTATION OF MI		JLTIPLE DEPENDENT		CLAIM	IM		740=		OR	7,000		
								+135=		OR	+270=		
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIÔNAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	ij	
	Independent	*	Minus 4	***		<u> </u>		X40=		OR	X80=	Ú.	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										•			
	* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.							+135=		OR	+270=		
***	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE WHITH THIS PROVIDENCE IS LESS THAN 3, ENTER THE "ALIGNEST Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												